

Exhibit “11”



BlueCross BlueShield
of Alabama

RECEIVED MAY 2 2005

Amtrak
Attention: Mr. Kirk Lamberth
5321 Perimeter Pkwy
Montgomery AL 36116 5125

April 25, 2005

Billing Account Number: 05900999

Dear Group Administrator:

Your Blue Cross and Blue Shield group account is presently paid to *April 1, 2005*. On *May 1, 2005*, your 30 day grace period for paying the premiums will expire and you will be considered delinquent paying your account. Payment will stop for claims incurred after the date to which your account is paid.

If you have mailed your payment, please disregard this letter. If you need to verify that your payment has been received, if you have not received a current billing or if you are having problems with adjustments or rates, please contact Doris Booker at (205)220-7316 for assistance.

You must pay the balance reflected on your current billing immediately. Partial payment will not continue your group coverage. To assure prompt application to your account, this delinquent payment needs to be mailed to Blue Cross and Blue Shield of Alabama, Post Office Box 360037, Birmingham, Alabama 35236-0037.

If you do not pay the balance in full by *May 5, 2005*, all enrolled employees will be notified that their coverage is cancelled, effective *April 1, 2005*.

It is your obligation to notify your employees that premium payments have not been made timely and that any precertification of hospital admissions or verification of coverage, which were based on the terms of the contract, are no longer valid. Claims incurred beyond the date to which the account is paid will not be honored.

If you need additional information, please feel free to contact your Customer Account Representative at the above number.

Sincerely,

A handwritten signature in black ink that reads "Shannon Williams".

Shannon Williams
Account Analyst
Customer Accounts

450 Riverchase Parkway East P.O. Box 995 Birmingham, Alabama 35298-0001

Per Doris - Paid
M 4/27/05
Jm
5/2/05